

COUNTY OF LOS ANGELES DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU
QUALITY IMPROVEMENT DIVISION (FY 2014-2015)

TEST CALL INSTRUCTIONS

Plan to make Test Calls during the week in which your Service Area Test Calls are scheduled (See Service Area Test Call Schedule). Test Calls may be placed on weekends (Friday after 5:00PM – Monday before 8:00AM), holidays (e.g. Friday July 4th), and/or after hours (Monday – Friday before 8:00AM and after 5:00PM).

Before calling, please be aware that the ACCESS Center employee MAY ASK YOU for your name, social security number, date of birth, phone number and address. Prior to making a Test Call, decide what personal information you are willing to share and what fictional information you will be providing.

Please print out a test call Form from the LACDMH QI website and complete one form per test call.

You will also be asked if you are a Medi-Cal recipient of services and you should respond that you are NOT. If you respond that you are a Medi-Cal recipient you will be asked for your Medi-Cal number.

IT IS NOT NECESSARY FOR YOU TO SHARE ANY AUTHENTIC PERSONAL INFORMATION AS YOU ARE CALLING IN THE ROLE OF A “SECRET SHOPPER.” Decide in advance how you want to respond to the following questions.

- Caller’s name?
- Caller’s social security number? (You are encouraged to make one up in advance of the call or just refuse to provide it.)
- Caller’s date of birth?
- Caller’s phone number?
- Caller’s address?

DO NOT CALL WITH A CRISIS OR EMERGENCY SCENARIO. If you want scenario ideas, see the Test Call Scenarios document. You may follow the scenarios exactly or use them to help you in developing your own scenario. When applicable, inquire about the process for obtaining a list of the MHP’s providers.